

| POSITION | INITIALS | ID NO. | DATE |
|----------------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | RSD | | 3/6/01 |
| FORMALITY REVIEW | LT | 857 | 3/12/01 |
| RESPONSE FORMALITY REVIEW | HD | 676 | 06/14/01 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|-------|-----------------|
| Final | Original |
| 1 | 1/01/01/01/01 |
| 2 | ✓ 1/03/03/03/03 |
| 3 | ✓ J |
| 4 | ✓ V |
| 5 | ✓ V |
| 6 | ✓ V |
| 7 | ✓ V |
| 8 | ✓ V |
| 9 | ✓ V |
| 10 | ✓ J |
| 11 | ✓ V |
| 12 | ✓ V |
| 13 | ✓ V |
| 14 | ✓ V |
| 15 | ✓ V |
| 16 | ✓ V |
| 17 | ✓ V |
| 18 | ✓ V |
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| 20 | ✓ V |
| 21 | ✓ V |
| 22 | ✓ V |
| 23 | ✓ V |
| 24 | ✓ J |
| 25 | J J |
| 26 | ✓ V |
| 27 | ✓ V |
| 28 | ✓ V |
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| 35 | ✓ V |
| 36 | ✓ J |
| 37 | ✓ V |
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| 39 | ✓ V |
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| Claim | Date |
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| Final | Original |
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| Claim | Date |
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here